PAGE 1 / 4

FEC FORM 5

REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

To Be Used by Persons (Other than Political Committees) including Qualified Nonprofit Corporations

(c) City, State and ZIP Code DES MOINES IA 50321 2. Corporate filers only Is the filer a qualified nonprofit corporation? Yes No 1. Name of Employer Occupation 4. TYPE OF REPORT (check appropriate boxes): (a) April 15 Quarterly Report Qu	(a) Name of Individual, Organization or Corporation AMERICAN FUTURE FUND		
DES MOINES LA 50321 Corporate filers only Is the filer a qualified nonprofit corporation? Yes No Individual filers only Name of Employer Occupation C 290011677 C 390011677 C 39001167 C 390011677 C 390011677 C 390011677 C 390011677 C 39001167 C 390011677 C 39001167 C		sly reported	
2. Corporate filers only Is the filer a qualified nonprofit corporation?	(c) City, State and ZIP Code		3. FEC Identification Number
Is the filer a qualified nonprofit corporation?	DES MOINES	IA 50321	
4. TYPE OF REPORT (check appropriate boxes): (a) April 15 Quarterly Report July 15 Quarterly Report October 15 Quarterly Report January 31 Year-End Report b) Is this Report an amendment? Yes No 5. COVERING PERIOD: FROM 10 08 2012 THROUGH 11 06 / 2012 Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or any political party committee or its agent. In addition, (if the independent expenditures reported herein were made by a corporation) I certify that the corporation is a qualified nonprofit corporation under the Commission's regulations. TYPE OR PRINT NAME OF PERSON COMPLETING FORM SIGNATURE Peter Christopher Winkelman Peter Christopher Winkelman Peter Christopher Winkelman		? ☐ Yes 🔀 No	C C90011677
(a) April 15 Quarterly Report July 15 Quarterly Report October 15 Quarterly Report January 31 Year-End Report **No ** 5. COVERING PERIOD: FROM 10 08 2012 THROUGH 11 06 2012 6. TOTAL CONTRIBUTIONS	Individual filers only Name of Employer	C	Occupation
July 15 Quarterly Report October 15 Quarterly Report January 31 Year-End Report **No ** 5. COVERING PERIOD: FROM 10 08 2012 THROUGH 11 06 2012 6. TOTAL CONTRIBUTIONS	4. TYPE OF REPORT (check appropriate boxes):		
District Control of Person Completing Filed) Quarterly Report Qua	(a) April 15 Quarterly Report		
Danuary 31 Year-End Report January 31 Year-End Report X 48-Hour Report	_	24-Hour Report	
b) Is this Report an amendment? Yes No S 5. COVERING PERIOD: FROM 10 08 2012 THROUGH 11 06 2012 6. TOTAL CONTRIBUTIONS	_	_	
5. COVERING PERIOD: FROM 10 10 11 10 10 10 10 10 10 1	January 31 Year-End Report	🔀 48-Hour Report	
7. TOTAL INDEPENDENT EXPENDITURES	5. COVERING PERIOD: FROM 10 THROUGH	2012	
suggestion of, any candidate or authorized committee or agent of either, or any political party committee or its agent. In addition, (if the independent expenditures reported herein were made by a corporation) I certify that the corporation is a qualified nonprofit corporation under the Commission's regulations. TYPE OR PRINT NAME OF PERSON COMPLETING FORM SIGNATURE [Electronically Filed] Peter Christopher Winkelman			
suggestion of, any candidate or authorized committee or agent of either, or any political party committee or its agent. In addition, (if the independent expenditures reported herein were made by a corporation) I certify that the corporation is a qualified nonprofit corporation under the Commission's regulations. TYPE OR PRINT NAME OF PERSON COMPLETING FORM SIGNATURE [Electronically Filed] Peter Christopher Winkelman			
[Electronically Filed] Peter Christopher Winkelman Peter Christopher Winkelman	suggestion of, any candidate or authorized committee or agent of either, or any politi	cal party committee or its agent. In addi	tion, (if the independent expenditures reported
Peter Unistopher Winkelman	TYPE OR PRINT NAME OF PERSON COMPLETING FORM		
	Peter Christopher Winkelman	Peter Christopher Winkelman	10/10/2012
NOTE: Submission of false, erroneous or incomplete information may subject the person signing this report to the penalties of 2 U.S.C. §437g.	NOTE: Submission of false, erroneous or incomplete information may	subject the person signing this report to	_

For further information, contact:

Federal Election Commission, 999 E Street, N.W., Washington, D.C. 20463 Toll Free 800-424-9530, Local 202-694-1100

FEC Schedule 5 (REV. 09/2005) 5PG021

SCHEDULE 5-E ITEMIZED INDEPENDENT EXPENDITURES

PAGE 2 OF 4 FOR LINE 7 OF FORM 5

AME OF FILER (In Full) AMERICAN FUTURE FUND						
Full Name (Last, First, Middle Initial) of Paye Arena Communications	е			Date		
Mailing Address				10	04	2012
1780 Sequoia Vista Circle				Amount		
City	State	Zip Code				15159.00
Salt Lake City	UT	84104		Transac	ion ID : F57.000	
Purpose of Expenditure Voter contact mail production & postage: "Chir	าล #1"	Category/ Type	004	Office Sought:	X House Senate	State: IA District: 01
Name of Federal Candidate Supported or Op Bruce Braley	posed by Expend	diture:		Check One:	President Support	X Oppose
Calendar Year-To-Date Per Election for Office Sought		151	59.00	Disbursement F 201 Other		General
Full Name (Last, First, Middle Initial) of Paye	е			Date		
Arena Communications				10	04	2012
Mailing Address 1780 Sequoia Vista Circle				Amount	سنا د	
City	State	Zip Code				13574.00
Salt Lake City	UT	84104		Transact	ion ID : F57.0000	002
Purpose of Expenditure Voter contact mail production & postage: "Wa	rning Signs"	Category/ Type	004	Office Sought:	X House Senate	State: IA District: 04
Name of Federal Candidate Supported or Op Christie Vilsack	posed by Expend	diture:		Check One:	President Support	X Oppose
Calendar Year-To-Date Per Election for Office Sought		135	74.00	Disbursement F 201 Other		G eneral
Full Name (Last, First, Middle Initial) of Paye	е			Date		
Arena Communications Mailing Address 4700 Seques Vista Circles				10	10 /	2012
1780 Sequoia Vista Circle				Amount		
City	State	Zip Code				15159.00
Salt Lake City	UT	84104		Transac	tion ID : F57.000	
Purpose of Expenditure Voter contact mail production & postage: "Chi	na #3"	Category/ Type	004	Office Sought:	House	State:IA
Name of Federal Candidate Supported or Op					Senate President	District:01
Bruce Braley	posed by Expend	inule.		Check One:	Support	Oppose
Calendar Year-To-Date Per Election for Office Sought		303	18.00	Disbursement F 201 Other	or: Primary 2 (specify)	General
(a) SUBTOTAL of Itemized Independent Expe	nditures			·	7	43892.00
(b) SUBTOTAL of Unitemized Independent Ex	cpenditures			•	7 1 1 7	
(c) TOTAL Independent Expenditures(carry total from last page forward to				.	<i>y</i>	

SCHEDULE 5-E ITEMIZED INDEPENDENT EXPENDITURES

PAGE 3 OF 4 FOR LINE 7 OF FORM 5

NAME OF FILER (In Full) AMERICAN FUTURE FUND	·
AMERICANTOTORETOND	
Full Name (Last, First, Middle Initial) of Payee Angler, LLC	Date
Mailing Address	10 09 2012
1100 G Street NW Suite 805	Amount
City State Zip Code	
Washington DC 20005	53600.00 Transaction ID : F57.000004
Purpose of Expenditure Social media production & placement: "A New Path" Category/ Type 004	Office Sought: House State:
Name of Federal Candidate Supported or Opposed by Expenditure: Mitt Romney	Check One: District: President Support Oppose
Calendar Year-To-Date Per Election for Office Sought 5741243.92	Disbursement For: Primary General 2012 Other (specify)
Full Name (Last, First, Middle Initial) of Payee	Date
Angler, LLC	10 09 2012
Mailing Address 1100 G Street, NW	Amount
Suite 805 City State Zip Code	
Washington DC 20005	201618.18
Purpose of Expenditure Category/	Office Sought: House State:
Outdoor ad production & placement: Billboards Outdoor ad production & placement: Dillboards Outdoor ad production & placement: Dillboards	Senate
Name of Federal Candidate Supported or Opposed by Expenditure: Barack Obama	President District: Check One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought 5942862.10	Disbursement For: Primary General Other (specify)
Full Name (Last, First, Middle Initial) of Payee	Date
Salem Radio Network	10 / 09 / 2012
Mailing Address 6400 N. Belt Line Rd.	
Suite 220	Amount
City State Zip Code Irving TX 75063	79900.00
5 (5 1)	Transaction ID : F57.000006
Purpose of Expenditure Radio and online advertising Category/ Type 004	Office Sought: House State: Senate District:
Name of Federal Candidate Supported or Opposed by Expenditure:	Negative President
Mitt Romney	Check One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought 6022762.10	Disbursement For: Primary General Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	335118.18
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	······ >

SCHEDULE 5-E ITEMIZED INDEPENDENT EXPENDITURES

PAGE	4	OF	4
FOR LI	VF 7 (OF FO	RM 5

NAME OF FILER (In Full) AMERICAN FUTURE FUND Full Name (Last, First, Middle Initial) of Payee Date Angler, LLC 2012 09 Mailing Address 1100 G Street NW Amount Suite 805 Zip Code City State 860.00 DC Washington 20005 Transaction ID: F57.000007 Purpose of Expenditure Office Sought: Category/ House State: 004 Social media production: make2012count.com Type Senate District: President Name of Federal Candidate Supported or Opposed by Expenditure: Mitt Romney Check One: Support Oppose Disbursement For: Primary General Calendar Year-To-Date Per Election 2012 Other (specify) 6023622.10 for Office Sought Full Name (Last, First, Middle Initial) of Payee Date Angler, LLC 10 2012 Mailing Address 1100 G Street NW Amount Suite 805 City State Zip Code 92500.00 DC 20005 Washington Transaction ID: F57.000008 Purpose of Expenditure Office Sought: House Category/ State: 004 Social media production & placement: "Heartbeat" Type Senate District: . President Name of Federal Candidate Supported or Opposed by Expenditure: Barack Obama X Oppose Check One: Support Disbursement For: ✓ General Primary Calendar Year-To-Date Per Election 6116122.10 2012 Other (specify) for Office Sought Full Name (Last, First, Middle Initial) of Payee Date Mailing Address Amount City State Zip Code Purpose of Expenditure Office Sought: House Category/ State: Type Senate District: President Name of Federal Candidate Supported or Opposed by Expenditure: Check One: Oppose Support Disbursement For: Primary General Calendar Year-To-Date Per Election for Office Sought Other (specify) (a) SUBTOTAL of Itemized Independent Expenditures..... 93360.00 (b) SUBTOTAL of Unitemized Independent Expenditures..... (c) TOTAL Independent Expenditures..... 472370.18 (carry total from last page forward to Line 7)